

FORM 50A

[Refer rule 127A(4)]

Form to be submitted by Investigating Officer to vehicle manufacturer or component manufacturer or importer or retrofitter, as the case may be, of a motor vehicle or component

Notice ID	(Autogenerate)		Date	(Autogenerate)

Site of Investigation:

Manufacturer/Importer Name	(text box)
Manufacturer Importer Address	(text box)

Issue/Subject of Investigation:

Background:

<i>Pre-fill text box, to be before entering manufacturer premises; will remain static once filled</i>
Reasons for Investigation:
<i>Pre-fill text box, to be before entering manufacturer premises; will remain static once filled</i>

Evidence

Type (Data, Sample, Process, news, other)

Data Sample Process Other

Evidence details:

Data *To be active when "Data" checkbox is selected*

File No.	(text box)
Data date	(DD/MM/YYYY)
Other details	(text box)
Location	(text box)

Sample *To be active when "Sample" checkbox is selected*

Vehicle Component Sub-Assembly

Vehicle Make	(text box)
Vehicle Model	(text box)
Chassis No.	(text box)
Engine No./Motor ID	(text box)
Part Make	(text box)

Part Model	(text box)
Part ID/No.	(text box)
Seizure/sealing of Batch/production volume	
No. of samples/vehicles seized	
Process	<i>To be active when "Process" checkbox is selected</i>
(text box)	
Other	<i>To be active when "Other" checkbox is selected</i>
(text box)	
<i>(Add more sheets for additional evidence) -</i> Suspicion	<i>Button for evidence addition</i>
(text box)	

Witnesses Interview Required	Yes		No	
Witness No.	Sr. No. - auto generate if Yes , NA if No			
Witness Name	(text box) - editable if sr. no. generated; freezed cell, if NA			
Witness Designation	(text box) - editable if sr. no. generated; freezed cell, if NA			
Witness Department	(text box) - editable if sr. no. generated; freezed cell, if NA			
Testimony:				
(text box) - editable if sr. no. generated; freezed cell, if NA				
Witness Signature	<i>Provision for digital signature</i>			
<i>(Add more sheets for additional witnesses) -</i>			<i>Button for witness addition</i>	
Enclosures/document----				
Manufacturer representative				
Name	(text box)			
Designation	(text box)			
Department	(text box)			
Signature	<i>Provision for digital signature</i>			
Stamp/Seal				
Investigating Officer				
Name	(text box)			

Organisation	(text box)
Designation	(text box)
Department	(text box)
Signature	<i>Provision for digital signature</i>
Stamp/Seal	